STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Rubert J Sc	ulley	
II. Name of lobbyist's partnership, firm or corporation, if any:	0	
	D 1/2 1/	
(Name of partnership, firm or corporation)	2 New Ha	mpsnire
DO DO 2608 County	1.4	02300
(Name of partnership, firm or corporation) P.O. Box 3898; Concold Business Address: (Street) (Town/City)	(State)	(Zin Code)
152 41C (221) 182 41C (22)	(State)	11 Oct Market
(603 <u>415 - 8330</u> (608) <u>415 - 8339</u> (Fax)	e-mail ryscu	The grap amon weat. c. on
III. This statement covers: (Choose one – file separate reports for reportable expense transactions which are not attributable to any		ay file a separate report for
All reportable transactions occurring in the months prior to the rep		_
al Heat Council of N	ew Hampshir	æ
(Full Name of Client as it appears on the Lobbyist	Registration Form)	
OR	family) on the labbying	o Same listed below which are
 All reportable transactions by the lobbyist (including the lobbyist's unrelated to any particular client. 	ramily), or the lobbying	g firm listed below which are
IV. Date of Report April 26, 2017	July 26, 2017	
	vity from 4/1/17 to 6/30/17	,
October 25, 2017 \Box activity from 7/1/17 to 9/30/17 acti	January 31, 2018 \square vity from 10/1/17 to 12/31.	/17
	, ,,	•
V. There have been no fees received and no reportable trans		
lf this box is checked, complete just this form and submit it to the Secre Concord, NH 03301.	etary of State's Office, S	stale House, Room 204,
VI. Clieck if additional reports are attached: If you have received fees or made expenditures, you must file Add	landum A . Fees and Ex	vnancas
If you have paid an honorarium or reimbursed expenses, you must		
Expense Reimbursement	Additional 2 To	,
If you, your firm, or your family has made political contributions,	you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by Lobbyist have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby s	wear or affirm that the f	oregoing information is true
and complete to the best of my knowledge and belief.		
(Lose & licely	4-24-17 (Date	
(Signature of lobbyist)	(Date	
ROBERT T Sacret		RECEIVED
(Print Name of lobbyist)		
1		155 5 H 44

APR 2 5 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Robert J. Sailey	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Oil Heat Council of New Hamp	shire
III. Name of Client Oil Heat Council & NH	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	nt relations, or public relations service ross fee amount reported shall not b
a) Total of all fees received in this reporting period	a)\$ 2,295,50
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$
c) Total of all fees received to date (Add lines a and b)	0)\$ 2,295.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid xpenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b)\$
c) Total of all itemized expenditures reported in detail in section VI.	c)\$

	,
d) Total expenses for this reporting period (Add lines a, b and c)	d)\$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	that the foregoing information
is true and complete to the best of my knowledge and belief.	
(See) Liver	4-24-17
(Signature of lobbyist)	(Date)
ROBERT J SOULGY	
(Print Name of lobbyist)	